## Case 19-12806-mdc Doc 23 Filed 08/23/19 Entered 08/23/19 18:24:11 Desc Main Document Page 1 of 2

Fill in this information	n to identify your case:	
Debtor 1	William T. Powell	_
Debtor 2 (Spouse, if filing)		_
United States Bankr	uptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number 1	9-12806	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forr	<u>n 106l</u>	MM / DD/ YYYY
Schedule I	: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment			
		Debtor 1	Debtor 2 or non-filing spouse
	Employment status	■ Employed	☐ Employed
	Employment status	☐ Not employed	■ Not employed
employers.	Occupation	President of corporation	
	Employer's name	Ronin Acquisition, Inc.	
	Employer's address	2101 N. 63rd Street 1st floor Philadelphia, PA 19151	
	Describe Employment Fill in your employment Information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Describe Employment  The provide Employment  The provide Student  The provide Employment  The provide Student  The provide Employment  The provide Student  The provide Employment  The provide Employment	Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Coccupation  Employment status  Coccupation  Employer's name  Employer's address	Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Employment status  Occupation  Employer's name  Employer's name  Employer's name  Employer's address  Coccupation may include student or homemaker, if it applies.  Debtor 1  Employed  I Not employed  President of corporation  Ronin Acquisition, Inc.  2101 N. 63rd Street  1st floor

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1	William T. Powell	_	Cas	se number (if known)	19-128	)6			
				F	or Debtor 1	For De	btor 2 or			
					or Dobtor .		ing spouse			
	Copy	y line 4 here	4.	\$	0.00	\$	0.00	<u> </u>		
_								_		
5.		all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	_		
	5b.	Mandatory contributions for retirement plans	5b.	\$ \$	0.00	\$	0.00	_		
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	Ф \$	0.00	\$	0.00	_		
	5u. 5e.	Insurance	5e.	\$	0.00	\$	0.00	_		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00			
	5g.	Union dues	5g.	\$	0.00	\$	0.00	_		
	5h.	Other deductions. Specify:	5h	+ \$	0.00	+ \$	0.00	_		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	)		
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	<u> </u>		
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business,						_		
	· ·	profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	2 245 00	\$	0.00			
	8b.	Interest and dividends	8b.	\$	3,215.00 0.00	\$	0.00	_		
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ	0.00	Ψ	0.00	<u>'</u>		
		regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	1		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	_		
	8e.	Social Security	8e.	\$	1,276.00	\$	0.00	_		
	8f.	Other government assistance that you regularly receive			,			_		
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	9							
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00			
	8g.	Pension or retirement income	— 8g.	\$	734.00	\$	0.00	_		
	8h.	Other monthly income. Specify:	8h		0.00	·	0.00	_		
	· · · ·				0.00			_		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	5,225.00	\$	0.0	0		
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	;	5,225.00 + \$		).00 = \$	5,225.00		
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'				<del></del>	0,220.00		
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.									
	Spec	лу.					11. +\$	0.00		
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certales					12. \$	5,225.00		
							Combi			
12	Dov	ou expect an increase or decrease within the year after you file this form	2				month	ly income		
13.	y	No.								
	_	Yes. Explain:								
	_	·								